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State Licensing Board for Residential and General Contractors

Residential Division
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www.sos.ga.gov

CE AUDIT REPORT FORM

For the Two-year CE Reporting Period Ending June 30th of even numbered years

See Board Rules 553-12-.02, 553-12-.03, and 553-12-.04 on the Board's website for CE requirements. *Currently, RB is 6 hrs total (3 hrs per yr)*.

PLEASE PRINT OR TYPE			ms per yr, nee is 12 totar (omsperyr).		
Institute, Organization, or Agency Conducting Program	Title of Course		Location of Course	Dates Attended	Hours Completed	Documents Attached
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I certify that the above is true and accur	rate information and I have attached		July 1 st to June 30 th - Y]
required documentation.		July 1 st to June 30 th - Y			-	
			TOTAL HO	urs Completed		J
		SUBSCRIBED	AND SWORN BEFORE ME ON ⁻	THIS THE		
Printed Name License Number						
		DAY (DF, 20	<u> </u>		
			_		NOTARY	SEAL
Signature Date		NOTARY PUB				
CE Audit Report Form - revised 06/22		iviy Commiss	sion Expires:			